

# SPOTLIGHT

THE HOME OF CASTING

## Spotlight Performer Training Confirmation Form

Date:

Regarding performer:

This is to confirm that this performer attended the following:

School:

Course:

Dates/Length of Study:

Signed:

*\*By completing this form, you confirm that to the best of your knowledge the information you've provided is true and complete.*

Name:

Professional Email:

Position:

School:

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